Company Tracking Number: AS2667ST

TOI: MS08G Group Medicare Supplement - Standard Sub-TOI: MS08G.001 Plan A 2010

Plans 2010

Product Name: Group Medicare Supplement Plans

Project Name/Number: Advertising/AS2667ST

## Filing at a Glance

Company: UnitedHealthcare Insurance Company

Product Name: Group Medicare Supplement SERFF Tr Num: UHLC-127144753 State: Arkansas

**Plans** 

TOI: MS08G Group Medicare Supplement - SERFF Status: Closed-Filed- State Tr Num: 48612

Standard Plans 2010 Closed

Sub-TOI: MS08G.001 Plan A 2010 Co Tr Num: AS2667ST State Status: Filed-Closed

Filing Type: Advertisement Reviewer(s): Stephanie Fowler

Authors: Michelle Ambach, Tammy Disposition Date: 05/04/2011

Frederick, Bobbie Walton

Date Submitted: 04/28/2011 Disposition Status: Filed-Closed

Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

### **General Information**

Project Name: Advertising Status of Filing in Domicile: Not Filed

Project Number: AS2667ST Date Approved in Domicile:
Requested Filing Mode: File & Use Domicile Status Comments:

Explanation for Combination/Other: Market Type: Group

Submission Type: New Submission Group Market Size: Large Group Market Type: Association Overall Rate Impact:

Filing Status Changed: 05/04/2011

State Status Changed: 05/04/2011 Deemer Date:

Created By: Tammy Frederick Submitted By: Tammy Frederick

Corresponding Filing Tracking Number: AS2667ST

Filing Description:

We enclose for your information and review, proof copies of advertising for use in connection with the AARP group health insurance program. The enclosed advertising is new and does not replace material previously approved by the Department. The material included within this filing is an Invitation to Inquire.

Please note that the Business Reply Card, MS2531ST, that will be used with AS2667ST, is also included for your review.

Company Tracking Number: AS2667ST

TOI: MS08G Group Medicare Supplement - Standard Sub-TOI: MS08G.001 Plan A 2010

Plans 2010

Product Name: Group Medicare Supplement Plans

Project Name/Number: Advertising/AS2667ST

# **Company and Contact**

#### **Filing Contact Information**

Susan Cipollo, Director

680 Blair Mill Rd.

215-902-8444 [Phone]

Horsham, PA 19044

215-902-8813 [FAX]

**Filing Company Information** 

UnitedHealthcare Insurance Company CoCode: 79413 State of Domicile: Connecticut
185 Asylum Street Group Code: 707 Company Type: Life and Health

Hartford, CT 06103 Group Name: State ID Number:

(860) 702-5000 ext. [Phone] FEIN Number: 36-2739571

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## **Filing Fees**

Fee Required? Yes
Fee Amount: \$100.00
Retaliatory? No

Fee Explanation: 2 forms @ 50 per form = 100.00

Per Company: No

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

UnitedHealthcare Insurance Company \$100.00 04/28/2011 47044904

Company Tracking Number: AS2667ST

TOI: MS08G Group Medicare Supplement - Standard Sub-TOI: MS08G.001 Plan A 2010

Plans 2010

Product Name: Group Medicare Supplement Plans

Project Name/Number: Advertising/AS2667ST

# **Correspondence Summary**

#### **Dispositions**

StatusCreated ByCreated OnDate SubmittedFiled-ClosedStephanie Fowler05/04/201105/04/2011

Company Tracking Number: AS2667ST

TOI: MS08G Group Medicare Supplement - Standard Sub-TOI: MS08G.001 Plan A 2010

Plans 2010

Product Name: Group Medicare Supplement Plans

Project Name/Number: Advertising/AS2667ST

# **Disposition**

Disposition Date: 05/04/2011

Implementation Date: Status: Filed-Closed

Comment:

Rate data does NOT apply to filing.

Company Tracking Number: AS2667ST

TOI: MS08G Group Medicare Supplement - Standard Sub-TOI: MS08G.001 Plan A 2010

Plans 2010

Product Name: Group Medicare Supplement Plans

Project Name/Number: Advertising/AS2667ST

Schedule Item Schedule Item Status Public Access

FormPrint AdFiled-ClosedYesFormBusiness Reply CardFiled-ClosedYes

Company Tracking Number: AS2667ST

TOI: MS08G Group Medicare Supplement - Standard Sub-TOI: MS08G.001 Plan A 2010

Plans 2010

Product Name: Group Medicare Supplement Plans

Project Name/Number: Advertising/AS2667ST

#### Form Schedule

Lead Form Number: AS2667ST

Schedule	Form	Form Type Form Name	Action	Action Specific	Readability	Attachment
Item	Number			Data		
Status						
Filed-	AS2667ST	Advertising Print Ad	Initial		45.000	AS2667ST_A
Closed						d only.pdf
05/04/2011						
Filed-	MS2531ST	Advertising Business Reply Card	d Initial		45.000	MS2531ST_B
Closed						RC.pdf
05/04/2011						

Attention: Everyone eligible for Medicare

Medicare only pays about

80%

of Part B expenses.

The other

20%
or more is up to you.

A Medicare Supplement Insurance Plan could save you up to thousands of dollars in out of pocket costs.\*



Request your free information kit today.

Call toll-free [I-XXX-XXX-XXXX], code [XXX]

(TTY:711) or just mail this reply coupon.

AS2667ST

# Concerned about Medicare out-of-pocket costs? An AARP® Medicare Supplement Insurance Plan may help.

Medicare alone may leave you with various out-of-pocket expenses. That's why millions of people just like you have chosen an AARP Medicare Supplement Insurance Plan, insured by UnitedHealthcare Insurance Company.

This important insurance is a real solution that may help you cover some of the expenses Medicare doesn't pay, including co-payments and deductibles. Consider the only Medicare supplement insurance plans endorsed by AARP\*\* - offering competitive prices for AARP members.

As with all Medicare supplement plans you'll get:

- The freedom to choose any doctor or hospital that accepts Medicare patients
- No referrals needed ever to see specialists
- Virtually no claim forms



\*\*The AARP Medicare Supplement Insurance Plans carry the AARP name and UnitedHealthcare Insurance Company pays a royalty fee to AARP for use of the AARP intellectual property. Amounts paid are used for the general purposes of AARP and its members. Neither AARP nor its affiliate is the insurer.

AARP doesn't make individual recommendations for health-related products, services, insurance or programs. You are encouraged to evaluate your needs and compare products.

 $Insured \ by \ United Healthcare \ Insurance \ Company, Horsham, PA \ (United Healthcare \ Insurance \ Company \ of \ New \ York, Islandia, \ NY \ for \ New \ Yorkresidents).$ 

#### Not connected with or endorsed by the U.S. Government or the Federal Medicare Program.

Policy Form No. GRP 79171 GPS-1 (G-36000-4). In some states, plans may be available to persons eligible for Medicare by reason of disability. All plans may not be available in your state/area. Call to receive complete information including benefits, costs, eligibility requirements, exclusions and limitations.

AARP and its affiliate are not insurance agencies or carriers and do not employ or endorse insurance agents, brokers, producers, representatives or advisors.

#### This is a solicitation of insurance. An agent/producer may contact you.

\*Medicare Payment Advisory Commission (MedPAC). AData Book:Healthcarespending and theMedicareProgram, June 2010. http://www.medpac.gov/documents/Jun10DataBookEntireReport.pdf (4Oct, 2010) p. 16

## Tellme more about AARP Medicare Supplement Insurance Plans.

Yes, send me my free information kit. I understand that I can apply anytime.

Call toll-free at [I-XXX-XXX-XXXX], code [XXX]. TTY: 711	Or please mail to: UnitedHealthcare Insurance Company P.Q. Box 25601 Lehigh Valley, PA 18003-9905		
Name (Mr., Mrs., Ms., Miss) Please Print	AARP Membership number		
Address	Date of Birth (Month/Day/Year)		
City, State, Zip Code	Part B Effective Date (Month/Day/Year)		





Request your free information kit today, even if you're not a member.

Call toll-free [I-XXX-XXX-XXXX]
Or mail to: UnitedHealthcare Insurance Company
P.Q Box 25601
Lehigh Valley, PA 18003-9905

This is a group Medicare supplement policy and you must be an AARP member to purchase this product.

Not connected with or endorsed by the U.S Governmentor the Federal Medicale Program. This is a solicitation of insurance An agent/producer may contact you.

In some states, plans may be available to personseligible for Medicareby reason of disability. Exclusions, limitations and reductions may apply.